

Attachment II

EVIDENCE FROM THE AUTHORIZATION CARD

Authorization Cards signed by employees indicating
they wish not to join the Union when hired.

• DO NOT DETACH • SEND BOTH FORMS
DUES DEDUCTION AUTHORIZATION FORM

To: Chinatown Head Start
Employer

You are hereby authorized and directed to deduct from salary earned by me while in your employ effective as of _____ the prescribed dues (includes \$1.00 subscription for Union Newspaper) and initiation fee of the Community and Social Agency Employees Union, District Council 1707, Local 95 American Federation of State, County and Municipal Employees, AFL/CIO, subject to the provision of the contract with the said Union.

Dues are not tax deductible for Federal Income Tax purposes. They may be tax deductible as ordinary and necessary business expenses.

"This Authorization shall be irrevocable for a period of one (1) year or until the termination date of the collective bargaining agreement, whichever is sooner, and shall however, renew itself from year to year unless the employee gives written notice addressed to District Council 1707 Finance Department at 75 Varick Street, New York, NY 10013, at least fifteen (15) days prior to any termination date of the revocation of this authorization."

Date 11/5/92 Signature WALKER V. MARK

TO UNION OFFICE • DO NOT DETACH •
APPLICATION FOR MEMBERSHIP

NAME { Ms. } (Print) WALKER First Name V Middle Initial MARK
Mr. { }
Mail Address 35 Park Ave #3M Home Phone (914) 351-7271
Number, Street and Apartment Number

City Suffern State NY Zip Code 10901
Community and Social Agency Employees Union, District Council 1707,
75 Varick Street, New York, NY 10013
LOCAL 95, A.F.S.C.M.E. — A.F.L.-C.I.O.

Dues are not tax deductible for Federal Income Tax purposes. They may be tax deductible ordinary and necessary business expenses.

I hereby request and accept membership in the above named union and of my own free will authorize their agents or representatives to act for me as a collective bargaining agent in all matters pertaining to payral wages, hours of employment and other conditions of employment.

Date 11/5/92 Signature WALKER V. MARK

Agency Where Employed Chinatown Head Start
Location Where Employed 180 Mott St., New York, NY 10013

Job Title Assistant Teacher

Date of Hire 9/18/92 Weekly Salary _____

Social Security # 018-64-152-71 (Please Use Typewriter or Print Plainly)

I am not intended to be a union member.

• DO NOT DETACH • SEND BOTH FORMS
DUES DEDUCTION AUTHORIZATION FORM

To: Charlene Hark Stat
 Employer

You are hereby authorized and directed to deduct from salary earned by me while in your employ effective as of _____ the prescribed dues (includes \$1.00 subscription for Union Newspaper) and initiation fee of the Community and Social Agency Employees Union, District Council 1707, Local 95 American Federation of State, County and Municipal Employees, AFL-CIO, subject to the provision of the contract with the said Union.

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12-14-70 Per-f. Stat
 Date Signature

TO UNION OFFICE • DO NOT DETACH •
APPLICATION FOR MEMBERSHIP

Name { Ms. } (Print) _____ First Name _____ Middle Initial _____ Last Name _____

Mail Address _____ Number, Street and Apartment Number _____ Home Phone _____

City _____ State _____ Zip Code _____
 Community and Social Agency Employees Union, District Council 1707,
 LOCAL 95, A.F.S.C.M.E. — AFL-CIO.
 75 Varick Street, New York, NY 10013

Dues are not tax deductible for Federal Income Tax purposes. They may be tax deductible ordinary and necessary business expenses.

I hereby request and accept membership in the above named union and of my own free will authorize their agents or representatives to act for me as a collective bargaining agent in all matters pertaining to pay, wages, hours of employment and other conditions of employment.

Date _____ Signature _____

I do not want to join. Per-f. Stat

Agency Where Employed _____

Location Where Employed _____

Job Title _____

Date of Hire _____ Weekly Salary _____

Social Security # _____ (Please Use Typewriter or Print Plainly)

• DO NOT DETACH • SEND BOTH FORMS
DUES DEDUCTION AUTHORIZATION FORM

To: Community Head Start
Employer

You are hereby authorized and directed to deduct from salary earned by me while in your employ effective as of _____ the prescribed dues (includes \$1.00 subscription for Union Newspaper) and initiation fee of the Community and Social Agency Employees Union, District Council 1707, Local 95 American Federation of State, County and Municipal Employees, AFL-CIO, subject to the provision of the contract with the said Union.

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3-8-90 _____
Date Signature

TO UNION OFFICE • DO NOT DETACH •
APPLICATION FOR MEMBERSHIP

NAME { Ms. } { Print } _____
{ Mr. } { First Name } _____
{ Middle Initial } _____
{ Last Name } _____

Mail Address _____
Number, Street and Apartment Number _____
Home Phone _____

City _____ State _____ Zip Code _____

**Community and Social Agency Employees Union, District Council 1707,
LOCAL 95, A.F.S.C.M.E. — AFL-CIO.
75 Varick Street, New York, NY 10013**

Dues are not tax deductible for Federal Income Tax purposes. They may be tax deductible as ordinary and necessary business expenses. I hereby request and accept membership in the above named union and of my own free will authorize their agents or representatives to action me as a collective bargaining agent in all matters pertaining to pay rate wages, hours of employment and other conditions of employment.

Date _____ Signature _____

Agency Where Employed I don't want to join this union

Location Where Employed _____

Job Title _____

Date of Hire _____ Weekly Salary _____

Social Security # _____ (Please Use Typewriter or Print Plainly)

• DO NOT DETACH • SEND BOTH FORMS

DUES DEDUCTION AUTHORIZATION FORM

To: _____
Employer

You are hereby authorized and directed to deduct from salary earned by me while in your employ effective as of _____ the prescribed dues (includes \$1.00 subscription for Union Newspaper) and initiation fee of the Community and Social Agency Employees Union, District Council 1707, Local 95 American Federation of State, County and Municipal Employees, AFL/CIO, subject to the provision of the contract with the said Union.

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Date

Signature

TO UNION OFFICE • DO NOT DETACH •

APPLICATION FOR MEMBERSHIP

NAME {Ms. } (Print) JOYCE Last Name Chan
Mr. }
Mail Address 51-08 64th Street First Name JOYCE Middle Initial Chan Home Phone (718) 672-2300
City Woodside Number Street and Apartment Number NY State NY Zip Code 11377

Community and Social Agency Employees Union, District Council 1707,
LOCAL 95, A.F.S.C.M.E. - AFL-CIO.
75 Varick Street, New York, NY 10013

Dues are not tax deductible for Federal Income Tax purposes. They may be tax deductible ordinary and necessary business expenses.

I hereby request and accept membership in the above named union and of my own free will authorize their agents or representatives to act for me as a collective bargaining agent in all matters pertaining to pay rate wages, hours of employment and other conditions of employment.

Date _____ Signature Joyce Chan

Agency Where Employed DO NOT WANT TO JOIN

Location Where Employed _____

Job Title _____

Date of Hire _____ Weekly Salary _____

Social Security # _____ (Please Use Typewriter or Print Plainly)

• DO NOT DETACH • SEND BOTH FORMS •
DUES DEDUCTION AUTHORIZATION FORM

To: Mr. Chiofalo Head start
 Employer

You are hereby authorized and directed to deduct from salary earned by me while in your employ effective as of _____ the prescribed dues (includes \$1.00 subscription for Union Newspaper) and initiation fee of the Community and Social Agency Employees Union, District Council 1707, Local 95 American Federation of State, County and Municipal Employees, AFL-CIO, subject to the provision of the contract with the said Union.

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8/16/01 Date Samuel Signature

TO UNION OFFICE • DO NOT DETACH •
APPLICATION FOR MEMBERSHIP

NAME { Ms. } (Print) SIN YEE Middle Initial CHAU
 Mr. _____ First Name _____ Last Name _____

Mail Address: 147 Bayview St Home Phone _____
 Number, Street and Apartment Number

City Brooklyn State NY Zip Code 11214
Community and Social Agency Employees Union, District Council 1707.
LOCAL 95, A.F.S.C.M.E. - AFL-CIO.
75 Varick Street, New York, NY 10013

Dues are not tax deductible for Federal Income Tax purposes. They may be tax deductible as ordinary and necessary business expenses.

I hereby request and accept membership in the above named union and of my own free will authorize their agents or representatives to act for me as a collective bargaining agent in all matters pertaining to pay rate wages, hours of employment and other conditions of employment.

Date 1 Oct 2001 Samuel Signature

☒ Agency Where Employed _____

☒ Location Where Employed _____

☒ Job Title _____ Weekly Salary _____

☒ Date of Hire _____ (Please Use Typewriter or Print Plainly)

☒ Social Security # _____

• DO NOT DETACH • SEND BOTH FORMS
DUES DEDUCTION AUTHORIZATION FORM

To: Christian Head Staff Employer

You are hereby authorized and directed to deduct from salary earned by me while in your employ effective as of _____ the prescribed dues and initiation fee of the Community and Social Agency Employees Union, District Council 1707, Local 95, American Federation of State, County and Municipal Employees, AFL-CIO, subject to the provision of the contract with the said Union.

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Date 4/3/06 Signature [Signature]

Soc. Sec # 019-88-5139 Name (Print) Ollye Lir

TO UNION OFFICE • DO NOT DETACH •
APPLICATION FOR MEMBERSHIP

NAME { } (Print) First Name _____ Middle Initial _____ Last Name _____

Mail Address _____ Number, Street and Apartment Number _____ Home Phone _____

City _____ State _____ Zip Code _____

Community and Social Agency Employees Union, District Council 1707,
 LOCAL 95, A.F.S.C.M.E. - A.F.L.-C.I.O.,
 75 Varick Street, New York, NY 10013

Dues are not tax deductible for Federal Income Tax purposes. They may be tax deductible as ordinary and necessary business expenses.

I hereby request and accept membership in the above named union and of my own free will authorize it, their agents or representatives to act for me as a collective bargaining agent in all matters pertaining to pay rates, wages, hours of employment and other conditions of employment.

Date _____ Signature _____

Agency Where Employed _____

Location Where Employed _____

Job Title _____

Date of Hire _____ Weekly Salary _____

Social Security # _____ (Please Use Typewriter or Print Plainly)



April 6, 2006

Qiye Liu
8752 25th Ave
Brooklyn, N.Y. 11214

Community and Social Agency Employees Union, District Council 1707
LOCAL 95, A.F.S.C.M.E. – A.F.L.-C.I.O.
75 Varick Street. New York, NY 10013

To Whom It May Concern:
I wish not to join the Union.

Sincerely yours

A handwritten signature in black ink, appearing to read 'Qiye Liu', with a long, sweeping horizontal stroke extending to the right.

Qiye Liu

OT DETACH • SEND BOTH FORMS
DUES DEDUCTION AUTHORIZATION FORM

Watson Head Start
Employer

by authorized and directed to deduct from salary earned by me while in your
of _____ the prescribed dues
scription for Union Newspaper) and initiation fee of the Community and Social
s Union, District Council 1707, Local 95 American Federation of State, County
employees, AFL/CIO, subject to the provision of the contract with the said
tax deductible for Federal Income Tax purposes. They may be tax deduct-
and necessary business expenses.
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ve bargaining agreement, whichever is sooner, and shall however, renew itself
unless the employee gives written notice addressed to District Council 1707
ant at 75 Varick Street, New York, NY 10013, at least fifteen (15) days prior to any
of the revocation of this authorization."

Paul Allen Mear
Signature

TO UNION OFFICE • DO NOT DETACH •
APPLICATION FOR MEMBERSHIP

NAME { Ms. } (Print) _____ First Name _____ Middle Initial _____ Last Name _____

Mail Address _____ Number, Street and Apartment Number _____ Home Phone _____

City _____ State _____ Zip Code _____
Community and Social Agency Employees Union, District Council 1707,
LOCAL 95, A.F.S.C.M.E. — A.F.L.-C.I.O.
75 Varick Street, New York, NY 10013

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I hereby request and accept membership in the above named union and of my own free will authorize it,
their agents or representatives to act for me as a collective bargaining agent in all matters pertaining to pay rates,
wages, hours of employment and other conditions of employment

Date _____ Signature _____

Agency Where Employed _____

Location Where Employed _____

Job Title _____

Date of Hire _____ Weekly Salary _____

Social Security # _____ (Please Use Typewriter or Print Plainly)

Community and Social Agency Employees Union,
District Council 1707,
Local 95, A.F.S.C.M.E. - A.F.L.C.I.O
75 Varick Street, New York, NY 10013

March, 16, 2005

To whom it may concern:

Hi, this is Hil Wen Mai. I have decided not to join the union.

Sincerely, 

Hil Wen Mai
20 Prince ST #22
New York N.Y. 10012